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INDICATION FORM**

Application Number	10/659,008
Filing Date	September 10, 2003
First Named Inventor	Cardoso
Title	Nasal Cannula
Art Unit	3743
Examiner Name	Lopez
Attorney Docket Number	C0012.10.1

I hereby revoke all previous powers of attorney given in the above-identified application.

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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature	<i>Norman Cardoso</i>	Date	8/25/2006
Name	Norman Cardoso	Telephone	352-377-7779
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

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